



2019 Policy Agenda

Final: March 2019

HIVMA's policy positions are available [online](#).

Over the last three decades, advances in HIV research have transformed HIV prevention and treatment approaches and interventions. The science is clear that with early and continuous access to care and treatment individuals with HIV can achieve and sustain viral suppression, allowing them to live near normal life expectancies. When virally suppressed, individuals stay healthy, and they do not transmit HIV. While progress had been made in recent years in reducing new HIV infections, the gains are uneven and too many people with HIV are not benefiting from treatment in the U.S. and around the globe. Currently in the U.S., 85% of the 1.1 million people living with HIV are diagnosed; just over 60 percent of them are receiving care; 48 percent are retained in care and only 49% are virally suppressed.ⁱ Around the world, while 21 million people are now accessing life-saving treatment, 37 million people are living with HIV, 1.8 million new infections occur annually, and almost a million people with HIV died in 2017.ⁱⁱ To address these disparities and close the gap between scientific progress and its benefit to individual and public health, the [HIV community led by the "Act Now End AIDS" Coalition](#)¹ and the [Trump Administration](#) have each developed strategies for ending the HIV epidemic by significantly reducing new HIV infections. Achieving this goal will require advancing a comprehensive policy agenda that promotes strong health and public health systems throughout the country; ends HIV-related stigma and discrimination and addresses social determinants of health, including housing, food security and civil rights.

Improving access to HIV-related prevention, care and treatment by:

- **Access to Care:** Ensuring the availability of comprehensive, affordable, non-discriminatory healthcare coverage for individuals and families throughout the U.S.
- **Medicaid:** Sustaining the federal commitment and current financing structure for the Medicaid program, including the Medicaid expansion, and preventing the erosion of key Medicaid policies essential to the program's purpose of providing health care coverage to individuals and families, people with disabilities, and seniors who are low income.
- **Workforce:** Supporting policies that promote a robust and well-qualified HIV medical workforce and the diversity of providers critical to delivering high quality care including advanced practice providers, including fair and adequate reimbursement for cognitive services and creating loan forgiveness opportunities for HIV medical providers, such as designating Ryan White HIV clinics to be eligible National Health Service Corps sites.
- **PrEP:** Significantly increasing access to pre-exposure prophylaxis (PrEP) by addressing access barriers including health care coverage issues and availability for the uninsured; urging the development of a reliable national indicator for monitoring PrEP access; and engaging the public health, primary care and women's health provider communities in efforts to expand PrEP access.
- **Federal Funding:** Urging robust federal funding for HIV care and treatment, research and prevention, including for global health programs with a focus on the President's Emergency Plan for AIDS Relief (PEPFAR) and the Global Fund to Fight AIDS, Tuberculosis and Malaria.
- **Ryan White HIV/AIDS Program:** Sustaining a robust Ryan White Program as a public health program important to ending the HIV epidemic.

¹ HIVMA has endorsed the recommendation in the community's "Ending the HIV Epidemic: A Road Map for Federal Action."

- **Substance Use and the Opioid Epidemic:** Expanding comprehensive prevention and treatment programs to address the opioid crisis by recognizing addiction as a medical condition and disease, reducing injection drug use-related infectious disease transmissions and improving outcomes for patients with HIV with co-occurring substance abuse issues.
- **STD Epidemic:** Enhancing the response to the rise in sexually transmitted infections as a public health emergency.
- **Research:** Ensure robust federal funding for HIV/AIDS research through the National Institutes of Health and other agencies, advocate for sound research policies that are inclusive of key populations affected by HIV and continue building researcher capacity particularly among minority populations.
- **Prescription Drug Pricing:** Advancing policy solutions that address access and drug pricing challenges for HIV medications and other communicable infections, other higher prescription drugs and medications with little or no competition.
- **340B Drug Pricing Program:** Sustaining the ability of eligible safety-net clinics and hospitals to use the 340B Program to leverage scarce resources to provide comprehensive services, including prevention and treatment for HIV and other communicable diseases, to patients in their communities without other sources for care and treatment.
- **Reproductive Health:** Opposing efforts to restrict federal funding for programs in the U.S. or abroad based on their delivery of women’s health services, including abortion services.
- **Healthcare in Corrections:** Ensure funding and policies that support timely access to high quality, comprehensive healthcare services, including screening, prevention and treatment for HIV, viral hepatitis and mental health and substance use disorders, for justice-involved individuals.

Improving the response to the HIV pandemic and reduce HIV-related disparities, stigma and discrimination by advancing evidence-based public health and prevention policies through:

- **Harm Reduction:** Supporting a comprehensive response to the opioid epidemic informed by harm reduction strategies that includes the use of federal and state funding to increase availability of syringe access programs and safe consumption sites as a gateway to substance use treatment and health care services.
- **Stigma, Discrimination, and Criminalization:** Ending discrimination in healthcare or other settings and persecution and criminalization related to HIV status, sexual orientation or gender identity in the U.S. and abroad.
- **Comprehensive Sexual Health Education:** Supporting comprehensive, evidence-based sexual health education and access to women’s preventive health care services, including pregnancy prevention.
- **Affordable Housing:** Ensuring affordable housing is available to low-income individuals as a public health intervention to prevent HIV and improve treatment outcomes for people with HIV and others at risk or living with chronic conditions.
- **Social Determinants of Health:** Advancing efforts to address the social determinants of health such as poverty, inadequate education and civil rights issues, which contribute to HIV-related health disparities.
- **Immigration and Travel Laws:** Supporting non-discriminatory immigration and travel laws and rules to enter and reside in the U.S.
- **Blood Donor Screening:** Advocating for updating the blood donor screening criteria to be based on behavioral risk factors for all donors rather than excluding donors based on sexual identity.

ⁱ Centers for Disease Control and Prevention. Understanding the HIV Care Continuum. July 2017. Online at: <https://www.cdc.gov/hiv/pdf/library/factsheets/cdc-hiv-care-continuum.pdf>.

ⁱⁱ UNAIDS. Global HIV & AIDS statistics — 2018 fact sheet. Online at: <http://www.unaids.org/en/resources/fact-sheet>.